

Testimony of Robert Rosenheck MD for the Appropriations Committee Public  
Hearing on Proposed FY 23 Adjustments for Health Agencies

My name is Robert Rosenheck. I am a professor of Psychiatry and Public Health at Yale medical school. I am speaking today as a volunteer with Columbus House. I enthusiastically support the budget amendments requested by the Reaching Home Campaign. I have been conducting research on housing homeless adults and families for the past 35 years and published hundreds of research studies on related subjects. I have worked mainly with veterans through the Veterans Health Administration and also with the Social Security Administration, Health and Human Services, and the Department of Housing and Urban Development.

I wish to speak, specifically, on behalf of the most stigmatized of these highly stigmatized Americans and their children who lack housing. Recent analyses suggests that 10% of currently homeless adults had been homeless before the age of 15, when they could deserve to be stigmatized for their condition. Those who experience homelessness as children are 9 times more likely than others to again experience homelessness as adults.

It is clear that supported housing, a combination of rent subsidies and professional support is the most effective and cost-effective way of lifting people out of homelessness. But widespread skepticism remains about the value of helping *some* homeless adults. In particular some people doubt whether people who have not yet conquered their addictions and who continue to use substances can benefit from such programs. Some say “They will just get drunk and leave”. Skepticism also remains about the value of providing housing to people who have been incarcerated. Some say “They will just use the housing to commit more crimes” and then disappear to avoid the law. These are also the subgroups most likely to have been homeless as children.

In fact our research shows they ALL benefit from supported subsidized housing – and to an equal degree.

In one study conducted with HUD and HHS we studied people entering supported housing who were using addictive substances more than 15 of the previous 30 days, half of the month. We compared them to homeless people who were totally sober with no days of substance use at all. Their housing outcomes were the same. About 80% were no longer homeless at the end of two years. The same is true for

those who had been incarcerated. The budget amendments requested by the Reaching Home Campaign can help all people, adults and children, who find themselves without a place to stay.

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